

BEST AVAILABLE COPY

National Stage Processing
Paralegal Specialist
(703) 305-8421

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO.	FILING DATE				
						APPLICANT(S)					
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	*	*	*
	IND.	DE	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1	/					51	/				
2	/					52	/				
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47	/					97					
48	/					98					
49	/					99					
50	/					100					
TOTAL IND.	16					TOTAL IND.					
TOTAL DEP.	37	←	→	→	→	TOTAL DEP.	←	→	→	→	→
TOTAL CLAIMS	53	←	→	→	→	TOTAL CLAIMS	←	→	→	→	→